PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

NSTRUCTIONS: This ppropriate, All further condicated unless corrected aintenance fee notifications.	correspondence including delow or directed other	r transmitting the ISSU; the Patent, advance or training in Block 1, by (a)	E FEE and PUBLICATIO lers and notification of ma) specifying a new corresp	ON FEE (if requir aintenance fees wi condence address;	ed), Blocks ill be mailed and/or (b) in	I through 5 she to the current of dicating a separ	ould be completed where orrespondence address as ate "FEE ADDRESS" for
CURRENT CORRESPONDE	paper	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
Pabst Patent Gr 1545 PEACHTR SUITE 320 ATLANTA, GA	I here State: addre trans:	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
71101114114, 011							(Depositor's name)
				······································			(Signature)
							(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/691,928			Jay A. Goldstein		JAG 100		1611
TITLE OF INVENTION	: ANTIFUNGAL FORM	ULATIONS				- 1917 - muniministra de destrica de sente la constanta de la	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	EFEE TOT	'AL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$870	\$300	\$0		\$1170	07/12/2012
EXAM	iner	ART UNIT	CLASS-SUBCLASS				
SCHLIENTZ, NATHAN W		1616	514-396000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	AND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or ty	pe)			
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI		tified below, no assignee pletion of this form is NC	e data will appear on the p of a substitute for filing an (B) RESIDENCE: (CIT)			ed below, the d	ocument has been filed for
G & R Pharmaceuticals, LLC Newton, Massachusetts							
Please check the approp	riate assignee category o	r categories (will not be p	orinted on the patent):	Individual 🛛 C	Corporation or	other private gr	oup entity \(\sum \) Government
4a. The following fee(s) are submitted: ☑ Issue Fee ☑ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			ib. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
a, Applicant clair	iatus (from status indicat ms SMALL ENTITY sta	tus. See 37 CFR 1.27.	☐ b. Applicant is no lo	nger claiming SM/	ALL ENTITY	status. See 37 C	CFR 1.27(g)(2).
NOTE: The Issue Fee a	and Publication Fee (if re	quired) will not be accept tates Patent and Tradema	ted from anyone other than rk Office.	the applicant; a re	gistered attori	ncy or agent; or	he assignee or other party in
interest as shown by the records of the United States Patent and Tradem / Michael J. Terapane / Authorized Signature			June 26, 2012				
Typod or printed name Michael J. Terapane, Ph.D., J.D.			And the second s	Registration No. 57,633			
This collection of informan application. Confide submitting the comple this form and/or sugge	rmation is required by 37 entiality is governed by 3 ted application form to t stions for reducing this t	CFR 1.311. The informa 35 U.S.C. 122 and 37 CF, he USPTO. Time will va- jurden, should be sens of	tion is required to obtain or R 1.14. This collection is e rry depending upon the ind the Chief Information Offi COMPUTED FORMS	r retain a benefit by stimated to take 12 sividual case, Any cer, U.S. Patent an TO THIS ADDRES	the public w minutes to c comments on d Trademark	hich is to file (as complete, includ the amount of Office, U.S. De	nd by the USPTO to process ing gathering, preparing, and time you require to complet partment of Commerce, P.C. of for Patents, P.O. Box 1450

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.